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PTO/SB/21 (09-04)
Approved for use through 07/31/2006. OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	09/397,298	
	Filing Date	September 15, 1999	
	First Named Inventor	Jeffrey M. HARRINGTON	
	Art Unit	2178	
	Examiner Name	T. V. Huynh	
Total Number of Pages in This Submission	14	Attorney Docket Number	559442002000

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Receipt Postcard Form PTO SB/08/a/b listing: * (9) US Patent Documents (not enclosed) * (7) Foreign Patent Documents * (1) Non Patent Literature Document
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	MORRISON & FOERSTER LLP		
Signature			
Printed name	Jonathan Bockman		
Date	March 4, 2005	Reg. No.	45,640



PATENT
Docket No. 559442002000

CERTIFICATE OF HAND DELIVERY

I hereby certify that this correspondence is being hand filed with the United States Patent and Trademark Office on March 4, 2005.

Cherrise Texidor
Cherrise Texidor

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Jeffrey M. HARRINGTON

Application No.: 09/397,298

Art Unit: 2178

Filed: September 15, 1999

Examiner: T. V. Huynh

For: ENHANCED VIDEO PROGRAMMING
SYSTEM AND METHOD UTILIZING A WEB
PAGE STAGING AREA

**SUPPLEMENTAL INFORMATION DISCLOSURE
STATEMENT**

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Sir:

Pursuant to 37 C.F.R. § 1.97 and § 1.98, Applicant submits for consideration in the above-identified application the documents listed on the attached Form PTO/SB/08a/b. Copies of the foreign and non-patent documents are also submitted herewith. The Examiner is requested to make these documents of record.

This Supplemental Information Disclosure Statement is being submitted after receipt of a first Office Action on the merits but before mailing of a final Office Action or Notice of Allowance. Accordingly, a Fee Transmittal form (PTO/SB/17) is attached to this submission in duplicate. 01-FC-1886 180.00 DA 03/07/2005 09397298

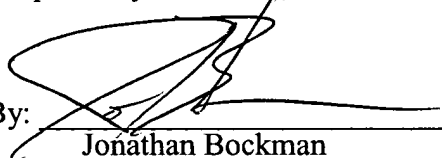
Applicant would appreciate the Examiner initialing and returning the Form PTO/SB/08a/b, indicating that the information has been considered and made of record herein.

The information contained in this Supplemental Information Disclosure Statement under 37 C.F.R. § 1.97 is not to be construed as a representation that: (i) a complete search has been made; (ii) additional information material to the examination of this application does not exist; (iii) the information, protocols, results and the like reported by third parties are accurate or enabling; or (iv) the above information constitutes prior art to the subject invention.

In the event that the transmittal letter is separated from this document and the Patent Office determines that an extension and/or other relief is required, applicant petitions for any required relief including extensions of time and authorizes the Commissioner to charge the cost of such petitions and/or other fees due in connection with the filing of this document to **Deposit Account No. 03-1952** referencing **559442002000**.

Dated: March 4, 2005

Respectfully submitted,

By: 

Jonathan Bockman
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).		Complete if Known	
FEE TRANSMITTAL For FY 2005		Application Number	09/397,298
		Filing Date	September 15, 1999
		First Named Inventor	Jeffrey M. HARRINGTON
		Examiner Name	T. V. Huynh
		Art Unit	2178
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	559442002000
TOTAL AMOUNT OF PAYMENT		(\$)	180.00

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 ☐ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent	200	100
Multiple dependent claims	360	180

Total Claims 127 - 127 = 0 **Extra Claims** 0 x 0 = 0 **Fee Paid (\$)** 0

Multiple Dependent Claims **Fee (\$)** 0 **Fee Paid (\$)** 0

Indep. Claims 7 - 7 = 0 **Extra Claims** 0 x 0 = 0 **Fee Paid (\$)** 0

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
<u>127</u>	<u>27</u>	<u>1</u>	<u>125</u>	<u>125</u>

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other: <u>1806 Submission of an Information Disclosure Statement</u>	<u>180.00</u>

SUBMITTED BY			
Signature		Registration No. (Attorney/Agent)	45,640
Name (Print/Type)	Jonathan Bockman	Telephone	(703) 760-7769
		Date	March 4, 2005



Substitute for form 1449/PTO				Complete if Known	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(Use as many sheets as necessary)</i>				Application Number	09/397,298
				Filing Date	September 15, 1999
				First Named Inventor	Jeffrey M. Harrington
				Art Unit	2178
				Examiner Name	Thu Huynh
Sheet	1	of	1	Attorney Docket Number	559442002000

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. ¹	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code ² (if known)			
	1.	4,931,865	6/5/1990	SCARAMPI	
	2.	5,603,078	2/11/1997	HENDERSON et al.	
	3.	5,771,307	6/23/1998	LU et al.	
	4.	6,058,430	5/2/2000	KAPLAN	
	5.	6,064,438	5/16/2000	MILLER	
	6.	6,141,010	10-31-2000	HOYLE	
	7.	6,177,931	1/23/2001	ALEXANDER et al.	
	8.	6,615,408	9/2/2003	KAISER et al.	
	9.	6,698,020	2/24/2004	ZIGMOND et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. ¹	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ⁶
		Country Code ³ -Number ⁴ -Kind Code ⁵ (if known)				
	10.	EP-0852443-A	7/8/1998		abstract	
	11.	EP-0901284-A	3/10/1999		abstract	
	12.	WO-99-55066-A1	10/28/1999		abstract	
	13.	WO-00-045599-A	8/3/2000		abstract	
	14.	WO-01-015357-A	3/1/2001		abstract	
	15.	GB-2356319-A	5/16/2001		abstract	
	16.	EP-1111914-A	6/27/2001		abstract	

*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant. ¹ Applicant's unique citation designation number (optional). ² See Kinds Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04. ³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). ⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document. ⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. ⁶ Applicant is to place a check mark here if English language Translation is attached.

NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²
	17.	"Overview," located at www.claria.com/companyinfo/ visited on March 1, 2005	

*EXAMINER: Initial if information considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

¹ Applicant's unique citation designation number (optional). ² Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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